

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant(s): Blackwell et al.
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APPEAL BRIEF UNDER 37 CFR § 41.37

This Appeal Brief is filed pursuant to the "Notice of Appeal to the Board of Patent Appeals and Interferences" filed on November 5, 2009.

1. *Real Party in Interest.*

The real party in interest in this appeal is Charlotte-Mecklenburg Hospital Authority d/b/a Carolinas Medical Center, a body corporate and politic established under the North Carolina Hospital Authority Act having a principal place of business at Charlotte, North Carolina and the assignee of the above-referenced patent application.

2. *Related Appeals and Interferences.*

There are no related appeals and/or interferences involving this application or its subject matter.

3. *Status of Claims.*

Claims 1-5, 12, 16, 18-19, 21, 27-29, 34, and 43-48 are pending and were examined on the merits. Claims 6-11, 13-15, 17, 20, 22-26, 30-33, and 35-42 were previously cancelled.

Each of claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34, and 44-46¹ stands rejected under 35 U.S.C. 102(e). Each of claims 4 and 29 stands rejected under 35 U.S.C. 103(a). Claim 43 stands rejected under 35 U.S.C. 103(a). And each of Claims 47 and 48 stands rejected under 35 U.S.C. 103(a). The prior art rejections of Claims 1-5, 12, 16, 18-19, 21, 27-29, 34, and 43-48 are appealed herein. A copy of the claims is included in the Claims Appendix.

4. *Status of Amendments.*

There are no unentered amendments in this application.

5. *Summary of Claimed Subject Matter.*

Embodiments of the claimed invention are directed to a mobile medical facility configured to treat a plurality of patients and to be transported over the roadways without requiring extensive transporting means. Embodiments of the claimed invention also relate to a method for providing medical care to a plurality of patients. (Abstract).

More specifically, as recited in independent Claim 1, the mobile medical treatment facility is capable of being transported over the roadways and treating a plurality of patients suffering from a range of conditions or injuries. (Page 7, lines 9-10). The medical treatment facility includes a trailer. (Page 7, lines 11-12). The trailer defines a floor area and has at least a first configuration and a second configuration. (Page 7, lines 13-17). In the first configuration the floor area of the trailer is reduced to allow for the transporting of the trailer. (Page 7, lines 13-15). In the second configuration, the floor area of the trailer supports a first medical treatment patient area and a second medical treatment patient area. (Page 7, lines 28-30; page 12, lines 18-21). In the second configuration, the first medical treatment patient area includes a first row of a plurality of patient treatment bays, a second row of a plurality of patient treatment bays and one or more curtains for dividing each of the patient treatment bays and for providing privacy therein. (Page 12, line 22 - page 13, line 12; Fig. 5). Each patient treatment bay includes either a patient bed or chair. (Page 12, line 22 - page 13, line 12; Fig. 5). And, in the second configuration, the second medical treatment patient area includes at least one operating station that includes an operating table for medical care. (Page 12, line 22 - page 13, line 12; Fig. 5).

¹ The listing of claims rejected under 35 U.S.C. 102(e) is incorrectly identified as “1-3, 5, 12, 16, 18-19, 21, 27-28, and 31-42 and 44-46” (emphasis added) at paragraph 3 on page 2 of the Final Office Action.

As recited in dependent Claim 2, the mobile medical treatment facility also includes a tractor for transporting the trailer. (Page 17, lines 20-23). As recited in dependent Claim 3, the mobile medical treatment facility further includes an awning system for providing an extended patient care work environment adjacent to and substantially around said trailer. (Page 16, lines 10-20; Fig. 25). As recited in dependent Claim 4, the mobile medical facility further includes a second trailer for storing equipment or supplies. (Page 17, lines 11-14).

As further recited in dependent Claim 5, the floor area in the second configuration is at least twice as large as the floor area in the first configuration. (Page 7, lines 25-27; page 8, lines 2-4). As further recited in dependent Claim 12, the trailer further includes a generator for providing power to the trailer and an air filtration system for filtering an air supply to the trailer. (Page 14, lines 24-29). The air filtration system maintains the air pressure inside the trailer at a higher level than the air pressure outside the trailer. (Page 14, lines 24-29). As recited in dependent Claim 16, the trailer further includes at least one heating source for providing heat to the trailer and at least one air conditioning source for cooling the trailer (Page 14, lines 24-26).

As recited in dependent Claim 18, the mobile medical treatment facility includes means for changing between the first and second configurations. (Page 11, lines 11-26). As recited in dependent Claim 19, the mobile medical treatment facility includes means for supplying an air supply for treating patients and a satellite communication system for providing telemedicine capability. (Page 15, lines 2-3 and lines 8-20).

According to independent Claim 21, the mobile medical treatment facility includes a trailer that has a first slide out, a second slide out, and a third slide out. (Page 7, line 28 - page 8, line 24). Each of the first, second, and third slide outs have a first and second position. (Page 8, lines 5-24). The trailer includes a first configuration when each of the first, second, and third slide outs is in its first position and a second configuration when each of the first, second, and third slide outs is in its second position. (Page 7, line 9 - page 8, line 24). The first configuration defines a first floor area. (Page 7, lines 25-27). The second configuration defines a second floor area. (Page 8, lines 2-4). The second floor area is at least twice the first floor area. (Page 7, lines 25-27; page 8, lines 2-4).

The trailer further includes a first patient treatment area and a second patient treatment area. (Page 12, lines 18-21). The first patient treatment area is defined at least partially by the first and second slide outs. (Page 8, lines 16-19). In the second configuration, the first patient

treatment area is configured to provide general care to a plurality of patients and includes a first row of a plurality of patient treatment bays, a second row of a plurality of patient treatment bays and one or more curtains for dividing each of the patient treatment bays and for providing privacy therein. (Page 12, line 22- page 13, line 12; Fig. 5). Each patient treatment bay includes either a patient bed or patient chair and equipment configured to treat a patient (page 12, line 22- page 13, line 12; Fig; 5). The second patient treatment area is at least partially defined by the third slide out. (Page 8, lines 19-21). In the second configuration, the second patient treatment area is configured to provide surgical care to at least one patient and includes at least one operating station that has an operating table and equipment configured to treat a patient. (Page 13, lines 1-5).

As recited in dependent Claim 27, the mobile medical facility further comprises an awning system that extends substantially around the trailer, when the trailer is in the second configuration, and provides an extended patient care work environment adjacent to said trailer. (Page 16, lines 10-27; Fig. 25). As recited in dependent Claim 28, the mobile medical facility further includes a tractor for pulling said trailer. (Page 17, lines 20-23). As recited in dependent Claim 29, the mobile medical facility further includes a second trailer for providing a storage area. (Page 17, lines 11-14).

As further recited in dependent Claim 43, which depends from Claim 21, in the second configuration, the first row of the plurality of patient treatment bays of the first treatment area includes six patient treatment bays, the second row of the plurality of patient treatment bays of the first treatment area includes six patient treatment bays, and the second treatment area includes two operating stations. (Page 13, lines 6-12; Fig. 5). As further recited in dependent Claim 44, the trailer includes a partition between the first and second treatment areas for controlling movement between the first and second treatment areas. (Page 13, lines 26-28). As further recited in dependent Claim 45, which depends from Claim 27, the awning system includes a plurality of litters, one or more supply carts, a light source, and an electric source for extending one or more of the medical capabilities of the mobile medical facility outside the trailer. (Page 16, line 10 - page 17, line 10).

According to independent Claim 34, the method for providing medical care to a plurality of patients includes transporting a first trailer in a first configuration from a first location to a second location. (Page 7, lines 9-17). In the first configuration, the first trailer defines a first

floor area and a size and a shape for facilitating the transportation of the first trailer over roadways. (Page 7, lines 9-27). The method further includes expanding first, second, and third slide outs of the first trailer in order to place the first trailer into a second configuration. (Page 7, line 28 - page 8, line 5). In the second configuration the trailer defines a second floor area greater than the first floor area. (Page 7, lines 25-27; page 8, lines 2-4). A first medical treatment patient area and a second medical treatment patient area are provided. (Page 8, lines 15-24). The first medical treatment patient area is provided that is defined at least partially by the first and second slide outs within the second floor area having a first row of a plurality of patient treatment bays and a second row of a plurality of patient treatment bays. (Page 8, lines 15-24; page 12, lines 22-23; Fig. 5). Each treatment bay includes either a patient bed or patient chair. (Page 8, line 26-27). The second medical treatment patient area is defined at least partially by the third slide out within the second floor area having at least one operating station that includes an operating table. (Page 8, lines 15-24; page 13, lines 1-5; Fig. 5). One or more curtains are also provided for dividing each of the treatment bays for privacy therein. (Page 12, line 32 - page 13, line 1).

As recited in dependent Claim 46, the method further includes placing an awning system substantially around the trailer to expand one or more medical capability of the mobile medical facility outside the trailer. (Page 16, lines 10-27; Fig. 25). As recited in dependent Claim 47, the awning system defines an enclosed area and the method further includes dividing the enclosed area into a first section for patients categorized as a higher priority and a second section for patients categorized as a lower priority. (Page 17, lines 3-10). As recited in dependent Claim 48, the method further includes designating one or more of the patient treatment bays of the first and second rows of the plurality of patient treatment bays of the first treatment area nearest the second treatment area as critical care patient treatment bays and designating one or more of the patient treatment bays of the first and second rows of the plurality of patient treatment bays of the first treatment area furthest from the second treatment area as general care patient treatment bays. (Page 12, lines 23-24; page 13 lines 6-12).

6. *Grounds of Rejection to be Reviewed on Appeal.*

The following grounds of rejection are appealed:

- (i) Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 stand rejected under 35 U.S.C. 102(e) as allegedly being anticipated by Pellegrin, Jr. (U.S. Patent No. 7,347,472, hereinafter “Pellegrin”) in view of Eberspacher (U.S. Patent No. 5,775,758, hereinafter “Eberspacher”);
- (ii) Claims 4 and 29 stand rejected under 35 U.S.C. 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher and in further view of Hirayama et al. (U.S. Patent No. 6,179,358, hereinafter “Hirayama”);
- (iii) Claim 43 stands rejected under 35 U.S.C. 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher; and
- (iv) Claims 47 and 48 stand rejected under 35 U.S.C. 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher and further in view of Valles (U.S. Patent No. 7,100,625, hereinafter “Valles”).²

7. *Argument.*

Applicant respectfully submits that Claims 1-5, 12, 16, 18-19, 21, 27-29, 34, and 43-48 are patentable over all of the cited references. As a preliminary matter, the rejection under 102(e) of Claims 1-3, 5, 12, 16, 18, 19, 21, 27, 28, 34, and 44-46 is improper as more than a single reference (i.e., Pellegrin and Eberspacher) is relied upon for the anticipation rejection. Furthermore, the combination of Pellegrin and Eberspacher in an obviousness rejection under 103(a) would be improper as there is no legitimate reason for the combination and the references in fact teach away from each other. In addition, even if the Pellegrin and Eberspacher are combined, none of the references, alone or in combination, teach or suggest an awning system that extends “substantially around the trailer,” as recited in Claims 3, 27, and 45-46. Neither Hirayama nor Valles cures the deficiencies of Pellegrin and Eberspacher. Accordingly, all of the claims are patentable over the cited references for at least the reasons provided below.

² Valles was first cited in the Final Office Action dated June 8, 2009, which is the subject of this appeal. Other than the name “Valles,” this reference is not further identified, i.e., no patent or publication number was provided in the Final Office Action, as required under 37 CFR 1.104(d). Moreover, although cited by the Examiner, Valles has not been listed by the Examiner on form PTO-892 as is the standard practice of the USPTO. On August 19, 2009, Examiner Joseph Pape told Attorney Glen Drysdale over the telephone that Valles was U.S. Patent No. 7,100,625.

A. Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 are patentable over Pellegrin in view of Eberspacher.

(1) The 102(e) Rejection Indicated in the Final Office Action is Improper

As a preliminary matter, Applicants note that paragraph 3 on page 2 of the Final Office Action indicates that “Claims checkasnd [sic] 1-3, 5, 12, 16, 18-19, 21, 27-28, and 31-42 and 44-46 are rejected under 35 U.S.C. 102(e) as being anticipated by Pellegrin, Jr. in view of Eberspacher.” (Final Office Action dated June 8, 2009, page 2). Claims 31-33 and 35-42, however, were previously cancelled. Therefore, the continued rejection of these claims is improper and should be reversed.

Furthermore, the Final Office Action rejects the listed claims under 35 U.S.C. 102(e) as being anticipated by Pellegrin in view of Eberspacher. *Id.* By definition, “[a] claim is anticipated only if each and every element as set forth in the claim is found, either expressly or inherently described, in a single prior art reference.” (MPEP 2131, citing *Verdegaal Bros. v. Union Oil Co. of California*, 814 F.2d 628, 631, 2 USPQ2d 1051, 1053 (Fed. Cir. 1987) (emphasis added)). According to the Examiner, Pellegrin either explicitly or inherently discloses each element of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46, except that “Pellegrin, Jr. does not disclose the use of dividing, privacy curtains” as recited in each of the claims. (Final Office Action dated June 8, 2009, page 3 (emphasis added)). The Final Office Action then turns to Eberspacher to cure the deficiencies of Pellegrin.

It is undisputed, therefore, that Pellegrin fails to disclose at least one element of each of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46. Therefore, the anticipation rejection under 102(e) of these claims is clearly improper and should be withdrawn.

(2) A Rejection of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 under 35 U.S.C. 103(a) based on a combination of Pellegrin and Eberspacher would also be improper.

A rejection of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 under 35 U.S.C. 103(a) based on a combination of Pellegrin and Eberspacher would also be improper.³ The Final Office Action states that Pellegrin either explicitly or inherently discloses each element of

³ On August 19, 2009, Examiner Joseph Page told Attorney Glen Drysdale over the telephone that the rejection of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34, and 44-46 should have been made under 35 U.S.C. 103(a) rather than 35 U.S.C. 102(e).

Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 except for the use of dividing, privacy curtains. (Final Office Action dated June 8, 2009, pages 3-4). According to the Final Office Action, however, “Eberspacher discloses a mobile medical trailer with a row of bays with dividing, privacy curtains and beds. It would have been obvious to one having ordinary skill in the art at the time the invention was made to provide the treatment bays of Pellegrin, Jr. with dividing, privacy curtains as taught by Eberspacher for their inherent function of privacy.” (Page 3).

In order to combine Pellegrin and Eberspacher as contemplated by the Examiner, an apparent reason must be provided as to why one skilled in the art would be motivated to combine the references. (*KSR Int'l Co. v. Teleflex, Inc.*, 127 S. Ct. 1727, 1731 (2007) (acknowledging the importance in making obviousness determinations of identifying “a reason that would have prompted a person of ordinary skill in the relevant field to combine the elements in the way the claimed invention does.”)). It is also well settled that it is improper to combine references if the references teach away from each other. (MPEP 2145(X)(D)(2) citing *In re Grasselli*, 713 F.2d 731, 743, 218 USPQ 769, 779 (Fed. Cir. 1983)). As explained in more detail below, the alleged reason to combine provided in the Final Office Action does not make sense in view of the teachings of Pellegrin. Moreover, Pellegrin and Eberspacher teach away from one another.

Pellegrin discloses an expandable trailer. (Pellegrin, col. 3, lines 14-17). The trailer includes two opposing and telescopic slide outs and a third slide out closer to the front end of the trailer. (Figs. 1 and 2). The trailer also has foldable floors. (Fig. 3). In the expandable configuration, the two opposing slide outs define a laboratory section and the third slide defines a conference section. (Figs. 1 and 2). The laboratory section is used “to train medical personnel via conducting one or more training activities and exercises on the anatomic material using various types of medical devices, equipment, and instrumentation.” (Col. 3, lines 66- col. 4, line 3). The equipment includes four examination tables and equipment that is normally found in an operating room. (Fig. 1, col. 5, lines 28-33; col. 6, lines 18). The conference section includes a standard conference room set up with a table, chairs, and video projector. (Fig. 1).

Eberspacher discloses a portable emergency care facility having an elongate enclosure with a number of treatment tables. (Eberspacher, Abstract). Eberspacher notes that “[p]rivacy curtains can separate the patients on adjacent treatment tables.” (Col. 5, lines 6-7).

According to the Examiner, one would have been motivated to use the privacy curtains of Eberspacher in the training facility of Pellegrin “for their inherent function of privacy. While the curtains may be open for certain aspects of training by the instructor, they may also be closed when practicing techniques in private.” (Final Office Action dated June 8, 2009, page 3).

Nothing in Pellegrin, however, suggests the need or preference for privacy or privacy curtains. Rather, Pellegrin actually teaches away from the use of privacy curtains. As mentioned above, the goal of Pellegrin is “to provide improved systems and methods for use in association with the training of medical personnel.” (Pellegrin, col. 1, lines 34-36). Thus, the primary objective of Pellegrin is to provide an open training facility which allows for the sharing of information between students and teachers. In fact, Pellegrin describes additional measures that can be taken to ensure that as many people as possible are able to see the training exercise being conducted: “One or more of the training stations A-D is preferably equipped with a video camera **262** mounted above the examination table **210**. . . . The video camera **262** is electronically coupled to a respective viewing monitor **260** to provide an unrestricted view of the cadaveric material **212** to the medical personnel during the training activities and exercises.” (Col. 6, lines 46-55, emphasis added). In other words, in addition to being silent regarding the need for privacy, the purpose of Pellegrin of allowing medical personnel to view the training exercise being conducted is directly opposed to the idea of providing privacy curtains.

Not only would providing privacy curtains in Pellegrin destroy the objective of allowing medical personnel access to view the training exercises being conducted, but there is also no need to provide privacy in Pellegrin. In Pellegrin, anatomic material is used to conduct the training activities and exercises. (Col. 4, lines 1-8). Pellegrin defines “anatomic material” as including “human cadavers, human cadaver parts, or any non-living animal tissue.” (Col. 4, lines 19-21). Human cadavers, human cadaver parts, and non-living animal tissue have no need for privacy.

Thus, there is no reason to combine the teachings of Eberspacher with Pellegrin, and Pellegrin in fact teaches away from any such combination. Therefore, the combination of Pellegrin and Eberspacher is improper. Any rejection based on such a combination, including a rejection of Claims 1-3, 5, 12, 16, 18-19, 21, 27-28, 34 and 44-46 under 103(a) based on Pellegrin and Eberspacher, is improper and should be reversed for at least the reasons described above.

(3) Neither Pellegrin nor Eberspacher, alone or in combination, teaches or suggests the claimed invention of Claims 3, 27, 45, or 46.

Claims 3, 27 and 45-46 further recite an awning system that extends substantially around the trailer. Claim 3 notes that the awning system is for providing “an extended patient care work environment adjacent to and substantially around said trailer.” The Final Office Action relies on Pellegrin as disclosing this feature. Applicants respectfully disagree.

The Final Office Action erroneously describes the additional features of Claims 3, 27 and 45-46 as being an awning that extends “partially” around the trailer, even though these claims explicitly state that the awning extends “substantially” around the trailer. In contrast, the awning **548** in Pellegrin is described as “a removable awning **548** to provide covered access to the entryways **540, 542**.” (Pellegrin, col. 10, lines 39-41; Fig. 1). Thus, although Pellegrin discloses an awning, the awning does not extend substantially around the trailer, as recited in Claims 3, 27, 45, and 46.

In addition, the awning **548** provided in Pellegrin is not “inherently capable of providing ‘an extended care environment’” as asserted in the Final Office Action on pages 3-4. Rather, the location and size of the awning **548** in Pellegrin makes it entirely unsuitable for providing an extended care environment. As noted above, Pellegrin’s awning **548** is designed to provide covered access to the entryways **540, 542**. The awning **548** is therefore located only in the vicinity of the two entryways, as shown in Fig. 1, reproduced below. The proximity of the awning **548** to the entryways **540, 542** precludes the possibility of setting up an extended care environment and caring for additional patients under the awning, as such an extended care environment would effectively block access to the entryways.

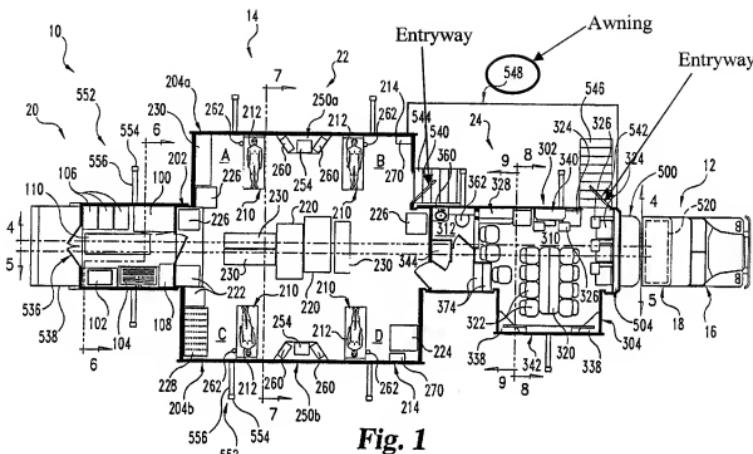


Fig. 1

Accordingly, Pellegrin does not teach or suggest an awning system as recited in Claims 3, 27, 45, or 46. Eberspacher does not cure the deficiencies of Pellegrin, and the Final Office Action does not assert this. Therefore, even if it were proper to combine Pellegrin and Eberspacher, this combination would not disclose each and every element of Claims 3, 27, and 45-46 for at least the reasons provided above.

B. Claims 4 and 29 are patentable over Pellegrin in view of Eberspacher and Hirayama.

Claims 4 and 29 stand rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher and further in view of Hirayama. Claims 4 and 29 depend from independent Claims 1 and 21, respectively. The Final Office Action does not suggest that Hirayama cures the above-noted deficiencies of Pellegrin and Eberspacher, and Applicant asserts that Hirayama does not cure the deficiencies. Therefore, Claims 4 and 29 are patentable for at least the reasons described above.

C. Claim 43 is patentable over Pellegrin in view of Eberspacher.

Claim 43 stands rejected under 35 U.S.C. 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher. Claims 43 depends from independent Claim 21. Therefore, Claim 43 is patentable for at least the reasons described above.

D. Claims 47 and 48 are patentable over Pellegrin in view of Eberspacher and further in view of Valles.

Claims 47 and 48 stand rejected under 35 U.S.C. 103(a) as allegedly being unpatentable over Pellegrin in view of Eberspacher and further in view of Valles. Claims 47 and 48 depend from independent Claim 34. Valles does not cure the deficiencies of Pellegrin and Eberspacher, and the Final Office Action does not assert this. In addition, Applicants note that Claim 48 further recites designating treatment bays as critical care patient treatment bays or general care patient treatment bays. None of the cited references disclose such an operation. Therefore, Claims 47 and 48 are patentable for at least the reasons described above.

E. Conclusion

The rejection under 102(e) of Claims 1-3, 5, 12, 16, 18, 19, 21, 27, 28, 34, and 44-46 is improper as more than a single reference (i.e., Pellegrin and Eberspacher) is relied upon for the anticipation rejection. Furthermore, the combination of Pellegrin and Eberspacher in an obviousness rejection under 103(a) would be improper as there is no legitimate reason for the combination and the references in fact teach away from each other. In addition, even if the Pellegrin and Eberspacher are combined, none of the references, alone or in combination, teach or suggest an awning system that extends “substantially around the trailer,” as recited in Claims 3, 27, and 45-46. Neither Hirayama nor Valles cures the deficiencies of Pellegrin and Eberspacher.

Accordingly, for at least all the reasons stated above, Applicant respectfully submits that the rejections of Claims 1-5, 12, 16, 18, 19, 21, 27-29, 34, and 43-48 should be reversed and requests that a Notice of Allowance be issued in due course.

8. *Claims Appendix.*

The claims currently on appeal are as follows:

1. A mobile medical treatment facility capable of being transported over the roadways and treating a plurality of patients suffering from a range of conditions or injuries, said medical treatment facility comprising: a trailer defining a floor area and having at least a first configuration and a second configuration, wherein in the second configuration the floor area of the trailer supports a first medical treatment patient area configured to provide general care to a plurality of patients and a second medical treatment patient area configured to provide surgical care to a least one patient and in the first configuration the floor area of the trailer is reduced to allow for the transporting of the trailer, wherein, in the second configuration, the first medical treatment patient area includes a first row of a plurality of patient treatment bays, a second row of a plurality of patient treatment bays and one or more curtains for dividing each of the patient treatment bays and for providing privacy therein and wherein, each patient treatment bay includes either a patient bed or chair and, in the second configuration, the second medical treatment patient area includes at least one operating station that includes an operating table for medical care.
2. The mobile medical treatment facility according to Claim 1 further comprising a tractor for transporting the trailer.
3. The mobile medical treatment facility according to Claim 1 further comprising an awning system for providing an extended patient care work environment adjacent to and substantially around said trailer.
4. The mobile medical treatment facility according to Claim 1 further comprising a second trailer for storing equipment or supplies.
5. The mobile medical treatment facility according to Claim 1 wherein the floor area in the second configuration is at least twice as large as the floor area in the first configuration.

Claims 6-11 (canceled)

12. The mobile medical treatment facility according to Claim 1 wherein the trailer further includes a generator for providing power to the trailer; an air filtration system for filtering an air supply to the trailer, wherein the air filtration system maintains the air pressure inside the trailer at a higher level than the air pressure outside the trailer.

Claims 13-15 (canceled)

16. The mobile medical treatment facility according to Claim 1 wherein the trailer further includes at least one heating source for providing heat to the trailer and at least one air conditioning source for cooling the trailer.

17. (canceled)

18. The mobile medical treatment facility according to Claim 1 further comprising means for changing between the first and second configurations.

19. The mobile medical treatment facility according to Claim 1 further comprising means for supplying an air supply for treating patients and a satellite communication system for providing telemedicine capability.

20. (canceled)

21. A mobile medical treatment facility capable of transporting over the roadways and treating a plurality of patients suffering from a range of conditions or injuries, said medical facility comprising:

a trailer having,

a first slide out, a second slide out, and a third slide out; wherein each of the first, second, and third slide outs have a first and second position,

a first configuration when each of the first, second, and third slide outs is in its first position, said first configuration defining a first floor area,

a second configuration when each of the first, second, and third slide outs ~~out~~ is in its second position, said second configuration defining a second floor area,

wherein the second floor area is at least twice the first floor area,

a first patient treatment area defined at least partially by the first and second slide outs and, in the second configuration, is configured to provide general care to a plurality of patients and includes a first row of a plurality of patient treatment bays, a second row of a plurality of patient treatment bays and one or more curtains for dividing each of the patient treatment bays and for providing privacy therein and wherein, each patient treatment bay includes either a patient bed or patient chair and equipment configured to treat a patient and,

a second patient treatment area at least partially defined by the third slide out and, in the second configuration, is configured to provide surgical care to at least one patient and includes at least one operating station that has an operating table and equipment configured to treat a patient.

Claims 22-26 (canceled)

27. The mobile medical facility according to Claim 21 further comprising an awning system that extends substantially around the trailer, when the trailer is in the second configuration, and provides an extended patient care work environment adjacent to said trailer.

28. The mobile medical facility according to Claim 21 further comprising a tractor for pulling said trailer.

29. The mobile medical facility according to Claim 21 further comprising a second trailer for providing a storage area.

Claims 30-33 (canceled)

34. A method for providing medical care to a plurality of patients comprising:
transporting a first trailer in a first configuration from a first location to a second location, wherein in the first configuration the first trailer defines a first floor area and wherein in the first configuration the first trailer defines a size and a shape for facilitating the transportation of the first trailer over roadways;
expanding first, second, and third slide outs of the first trailer in order to place the first trailer into a second configuration, wherein in the second configuration the trailer defines a second floor area greater than the first floor area; and
providing a first medical treatment patient area defined at least partially by the first and second slide outs within the second floor area having a first row of a plurality of patient treatment bays and a second row of a plurality of patient treatment bays, wherein each treatment bay includes either a patient bed or patient chair, and providing a second medical treatment patient area defined at least partially by the third slide out within the second floor area having at least one operating station that includes an operating table; and
providing one or more curtains for dividing each of the treatment bays for privacy therein.

Claims 35-42 (canceled)

43. The mobile medical facility according to Claim 21, wherein, in the second configuration, the first row of the plurality of patient treatment bays of the first treatment area includes six patient treatment bays, the second row of the plurality of patient treatment bays of the first treatment area includes six patient treatment bays, and the second treatment area includes two operating stations.

44. The mobile medical facility according to Claim 43, wherein the trailer includes a partition between the first and second treatment areas for controlling movement between the first and second treatment areas.

45. The mobile medical facility according to Claim 27, wherein the awning system includes a plurality of litters, one or more supply carts, a light source, and an electric source for

extending one or more of the medical capabilities of the mobile medical facility outside the trailer.

46. The method according to Claim 34 further comprising placing an awning system substantially around the trailer to expand one or more medical capability of the mobile medical facility outside the trailer.

47. The method according to Claim 46, wherein the awning system defines an enclosed area and further comprising dividing the enclosed area into a first section for patients categorized as a higher priority and a second section for patients categorized as a lower priority.

48. The method according to Claim 47 further comprising designating one or more of the patient treatment bays of the first and second rows of the plurality of patient treatment bays of the first treatment area nearest the second treatment area as critical care patient treatment bays and designating one or more of the patient treatment bays of the first and second rows of the plurality of patient treatment bays of the first treatment area furthest from the second treatment area as general care patient treatment bays.

9. ***Evidence Appendix.***

None

10. ***Related Proceedings Appendix.***

None

CONCLUSION

For at least the foregoing reasons, Applicant respectfully requests that the rejections be reversed.

It is not believed that extensions of time or fees for net addition of claims are required, beyond those that may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 CFR § 1.136(a), and any fee required therefore (including fees for net addition of claims) is hereby authorized to be charged to Deposit Account No. 16-0605.

Respectfully submitted,



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